

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449APTC

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

{use as many sheets as necessary}

三

7

7

2

Complete if Known

Application Number 10/574,554

Filing Date April 3, 2006

First Named Inventor: De Maria et al.

First Named Inventor	De Maria et al.
Act. Unit	2613

Employee Name: John Doe

Examiner Name: TBA

Attorney Docket Number | 10508.204-U

DOCUMENTOS

DOCUMENTS Searched, Serialized, Indexed

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

***EXAMINER:** Indicate if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 801.94. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20591. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner of Patents, Washington, DC 20591.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449APTC

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

{use as many sheets as necessary}

ג'ז

2 of 2

Complete if Known

Application Number	10/574,554
Filing Date	April 3, 2006
First Named Inventor	De Maria et al.
Art Unit	3617
Examiner Name	TBA
Attorney Docket Number	10508.204-US

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS

Examiner Signature	Date Considered	
-----------------------	--------------------	--

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner of Patents, Washington, DC 20231.